

CLAIMS ONLY

Serial No.

Filing Date

Priority Date

| | AS FILED | | AFTER 1st AMENDMENT | | AFTER 2nd AMENDMENT | | CLAIMS | * | * | | * | | * |
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| TOTAL IND. | | | | | | | | | | | | | |
| TOTAL DEP. | | | | | | | | | | | | | |
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* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS